

SPECIAL LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENT:

Planning Dept.
Office Use Only
Zoning Request

1. That I/we am/are all of the owners of the property described as County Tax-ID number(s):

and am/are authorized to take the action indicated herein and sign this Special Limited Power of Attorney.

(Name) _____

(Title) _____ (Telephone) _____

(Address) _____

(Name) _____

(Title) _____ (Telephone) _____

(Address) _____

(Name) _____

(Title) _____ (Telephone) _____

(Address) _____

2. I/We do hereby make, constitute and appoint:

(Name) _____ (Telephone) _____
(Applicant)

(Address) _____

(NOTE: In cases where the applicant is not the sole property owner, the applicant must obtain power of attorney from the property owner(s) even if an agent is to represent the application.)

OR

(Name) _____ (Telephone) _____
(Agent)

(Address) _____

(NOTE: If an agent is to represent the case and sign all documents, the agent must also obtain power of attorney from the property owner(s).)

to act as my/our true and lawful attorney-in-fact for and in my/our name, place and stead with full power and authority I/we would have if acting personally to seek rezoning, conditional use, special exception, variance, mobile home permit, modification to development standards or requirements and/or substantial accord determination and to complete a zoning disclosure affidavit and to set forth and offer such legally acceptable voluntarily proffered conditions including any additions, amendments, modifications or deletions thereto that in his discretion are deemed reasonable, appropriate and necessary except as follows:

3. This special limited power of attorney shall expire upon final action or withdrawal of the application to which this form applies.

4. In witness of the signature(s) made under Item 1 above, I/we have hereto set my/our hand and seal this _____ day of _____, 20__.

Signature #1: _____

Witnessed by: _____

Witnessed by: _____

Signature #3: _____

Witnessed by: _____

Witnessed by: _____

Signature #2: _____

Witnessed by: _____

Witnessed by: _____

Signature #4: _____

Witnessed by: _____

Witnessed by: _____

NOTE: This document shall be filed with the application and become a permanent part thereof.